UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

Washing



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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	OMB APPROVAL
RECEIVED	OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response
	SEC USE ONLY
210	Prefix Serial
v V	DATE RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.)								
Common Stock								
Filing Under (Check box(es) that apply	/): □ Rule 504 □ Ri	ule 505 🗵 🛚	Rule 50	6 □:	Section 4(6)	□ ULOE		
Type of Filing: New Fi	ing							
	A. BASIC IDENT	IFICATION DA	ATA					
1. Enter the information requested abo	ut the issuer							
Name of Issuer (Check if this is an a	mendment and name has ch	nanged, and indic	cate cha	nge.)				
SM&A								
Address of Executive Offices	(Number and Street, City, S	State, Zip Code)		Telephor	ne Number (Incl	uding Area Code)		
4695 MacArthur Court, 8th Floor, N	ewport Beach, California	92660		(949) 97	5-1550			
Address of Principal Business Operation	ons (Number and Street, City, S	State, Zip Code)		Telephor	ne Number (Incl	uding Area Code)		
(if different from Executive Offices)								
Brief Description of Business	Competition manageme	ent (business ca	pture a	and prop	osed developn	ieni) selvices inc		
post award risk mitigation and profi	t maximizing services.							
Type of Business Organization						OCT U 1 2007		
	☐ limited partnership, alre	ady formed	□ ot	her (pleas	se specify):	THOMSON		
☐ business trust	☐ limited partnership, to b	e formed				FINANCIAL—		
		Month	Ye	ear				
Actual or Estimated Date of Incorpora	ion or Organization:	1 1	0	6		☐ Estimated		
Jurisdiction of Incorporation or Orga	nization: (Enter two-letter	U.S. Postal Ser	rvice					
abbreviation for State: CN for Canada:	FN for other foreign jurisdi	iction)			D E			

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - · Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
Bauman, G. Timothy
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o SM&A, 4695 MacArthur Court, 8th Floor, Newport Beach, California 92660
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
Handy, Steve D.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o SM&A, 4695 MacArthur Court, 8th Floor, Newport Beach, California 92660
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
McCarthy, Cathy L.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o SM&A, 4695 MacArthur Court, 8th Floor, Newport Beach, California 92660
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
Reiners, Kevin L.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o SM&A, 4695 MacArthur Court, 8th Floor, Newport Beach, California 92660
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
Bowes, William C.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o SM&A, 4695 MacArthur Court, 8th Floor, Newport Beach, California 92660
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
Hanger, Dwight L.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o SM&A, 4695 MacArthur Court, 8th Floor, Newport Beach, California 92660
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
Lewis, J. Christopher
Business or Residence Address (Number and Street, City, State, Zip Code)

c/o SM&A, 4695 MacArthur Court, 8th Floor, Newport Beach, California 92660

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Reagan, Joseph B.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o SM&A, 4695 MacArthur Court, 8th Floor, Newport Beach, California 92660
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
Rodin, Robert
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o SM&A, 4695 MacArthur Court, 8th Floor, Newport Beach, California 92660
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
Stenbit, John P.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o SM&A, 4695 MacArthur Court, 8th Floor, Newport Beach, California 92660
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
Untracht, Robert J.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o SM&A, 4695 MacArthur Court, 8th Floor, Newport Beach, California 92660
Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
Myers, Steven S.*
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o SM&A, 4695 MacArthur Court, 8th Floor, Newport Beach, California 92660
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
Wasatch Advisors, Inc.*
Business or Residence Address (Number and Street, City, State, Zip Code)

150 Social Hall Avenue, Salt Lake City, UT 84111

^{*} Based on public filings of the beneficial owners.

•					B. IN	FORMAT	ION ABO	OUT OF	FERING					
											·		Yes	No
1.	Has the is:	suer sold,	or does th	e issuer in	tend to se	ll, to non-a	ccredited i	investors	in this offe	ering?				X
	Answer also in Appendix, Column 2, if filing under ULOE.									***				
2. What is the minimum investment that will be accepted from any individual?								\$245,000.00						
3.	Does the o	offering ne	ermit igint	ownership	n of a cina	de unit?							Yes □	No ⊠
J.	Does the C	memg po	ormit joint	Ownersing	o or a sing	, c unit:	***************************************	•••••				••••••		
4.	Enter the commission offering. with a state	on or sim If a persor	ilar remu n to be list	neration for ed is an as	or solicita sociated p	ition of pu person or a	rchasers i	in connect roker or c	tion with lealer regi	sales of stered with	securities h the SEC	in the and/or		
	persons of								_					
Full N	ame (Last 1	name first	, if individ	ual)										
Busine	ess or Resid	lence Add	ress (Num	ber and S	treet, City	, State, Zip	Code)					-		<u> </u>
Name	of Associat	ed Broke	r or Dealer						·····					
	in Which P								-					
	ck "All Stat												☐ All State	S
(AL) [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
[MT]	[NE]	[NV]	(NH)	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[sc]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[wi]	[WY]	[PR]		
	ame (Last r				treet, City	, State, Zip	Code)							
	of Associat							·						
States	in Which P	ercon Lic	ted Has Sc	licited or	Intends to	Solicit Pu	rchacere							
	ck "All Stat										· • • • • • • •		☐ All State	s
(AL)	[AK]											[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT] [RI]	(NE) (SC)	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK]. [WI]	[OR] [WY]	[PA] [PR]		
[131]	(SC)	[30]	[114]	ניאן	[01]	[41]	[۲۸]	[WA]	[** *]	[** 1]	[**1]	[1 17]		
Full N	lame (Last r	name first	, if individ	ual)		_								
Busine	ess or Resid	lence Add	ress (Num	iber and S	treet, City	, State, Zip	Code)							
	of Associat													
	in Which P												-	
(Che	ck "All Stat [AK]	es" or che	ck individ [AR]	lual States [CA]) [CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]	☐ All State	es
(IL)	[IN]	رمد _ا [JA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[M]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this

Type of Security	A Offe	ggregate ring Price	Am	ount Already Sold
Debt	S	-0-	s	-0-
Equity Sommon D Preferred		500,000.00	s	500,000.00
Convertible Securities (including warrants)	s	-0-	\$	-0-
Partnership Interests		-0-		-0-
Other (Specify: Limited Liability Company Interest)			· -	-0-
		-0-	s	
Total	\$	500,000.00	s	500,000.00
2. Enter the number of accredited and non-accredited investors who have purchased secur offering and the aggregate dollar amounts of their purchases. For offerings under Rule 50 the number of persons who have purchased securities and the aggregate dollar amou purchases on the total lines. Enter "0" if answer is "none" or "zero."	04, indicate int of their		Δαα	regate Dolla
		umber of nvestors	7	Amount of Purchases
Accredited Investors		2	s	500,000.00
Non-Accredited Investors		-0-	\$	-0-
Total (for filings under Rule 504 only)		N/A	s	N/A
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for a sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months first sale of securities in this offering. Classify securities by type listed in Part C Questic	prior to the	NOT APPI		
Type of Offering	Туре	of Security	Do	llar Amount Sold
Rule 505			s	
Regulation A			<u> </u>	_
Nogelation 1				_
Dala 504			-	
Rule 504			· ·	
Rule 504 Total			.	
Total	tion of the		3	
Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribu securities in this offering. Exclude amounts relating solely to organization expenses of The information may be given as subject to future contingencies. If the amount of an expense of the information may be given as subject to future contingencies.	tion of the the issuer. penditure is	× \$_		
Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribut securities in this offering. Exclude amounts relating solely to organization expenses of The information may be given as subject to future contingencies. If the amount of an expense not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees	tion of the the issuer.	⊠ \$ ₋		1 <u>,000.00</u>
Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribut securities in this offering. Exclude amounts relating solely to organization expenses of The information may be given as subject to future contingencies. If the amount of an expense not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees	tion of the the issuer.			1 <u>,000.00</u> 5 <u>,000.00</u>
Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribut securities in this offering. Exclude amounts relating solely to organization expenses of The information may be given as subject to future contingencies. If the amount of an expense not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees	tion of the the issuer.	<u> </u>		1 <u>,000.00</u> 5 <u>,000.00</u>
Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribut securities in this offering. Exclude amounts relating solely to organization expenses of The information may be given as subject to future contingencies. If the amount of an expense not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees	tion of the the issuer.	S S.		1 <u>,000.00</u> 5 <u>,000.00</u>
Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribut securities in this offering. Exclude amounts relating solely to organization expenses of The information may be given as subject to future contingencies. If the amount of an exprost known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees	tion of the the issuer.			1 <u>,000.00</u> 5 <u>,000.00</u>
Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribut securities in this offering. Exclude amounts relating solely to organization expenses of The information may be given as subject to future contingencies. If the amount of an expense not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees	tion of the the issuer.	□ \$_ □ \$_ □ \$_ □ \$_		1 <u>,000.00</u> 5 <u>,000.00</u>
Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribut securities in this offering. Exclude amounts relating solely to organization expenses of The information may be given as subject to future contingencies. If the amount of an expense not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees	tion of the the issuer.	S_ S_ S_		1 <u>,000.00</u> 5 <u>,000.00</u>

_	C. OFFERING PRICE, N	NUMBER OF INVESTORS, EXPENSES A	ND U	SE OF PROCEED	S		
b.	- · · · · · · · · · · · · · · · · · · ·	offering price given in response to Part C - Quee Part C — Question 4.a. This difference is the "a	'adjust	sted	.s	494,0	00.00
	each of the purposes shown. If the amount for	gross proceeds to the issuer used or proposed of for any purpose is not known, furnish an estimated of the payments listed must equal the appeart C — Question 4.b above.	nate ar	nd check	_	_	
				Payments to Officers, Directors & Affiliates	'S		Payments t Others
	Salaries and fees			s		\$	
	Purchase of real estate			\$		\$	
	Purchase, rental or leasing and installation of	f machinery and equipment		s	. 🗅	s	
	Construction or leasing of plant buildings and	d facilities	Ö	s		\$	
	Acquisition of other business (including the this offering that may be used in exchange	e for the assets or securities of					
	another issuer pursuant to a merger)	,		s	X	s	494,000
	Repayment of indebtedness			S		s	
	Working capital			S		s	
	Other (specify):		0	\$		\$	
	Column Totals			\$		\$	494,000
	Total Payments Listed (column totals added).)		⊠ \$	494,000	0.00	
_	-	D. FEDERAL SIGNATURE					
sign	ne issuer has duly caused this notice to be signe gnature constitutes an undertaking by the issuer formation furnished by the issuer to any non-ac	er to furnish to the U.S. Securities and Exchang	ge Cor	mmission, upon wri			
ls	ssuer (Print or Type)	Signature	Т	Date			
s	SM&A	10/1H26		Septe	ember	24,	, 2007
N	Name of Signer (Print or Type)	Title of Signer (Print or Type)				-	

ATTENTION

Steve Handy

Senior Vice President, Chief Financial Officer and Secretary

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

